

### Geriatric Drug Therapy Interventions

Cooper JW, editor. Haworth Press, Inc., Binghamton, New York, 1998.

Hardcover, 73 pages. US\$29.95.

This book is a compilation of a thought-provoking introductory review article, 3 research articles, and an illustrative case report. In his review, James Cooper highlights the disturbingly high prevalence of drug-related problems in older patients. Equally disturbing is the fact that very little progress has been made in this area. An important gap in previous research on geriatric drug utilization is the lack of studies with clinical outcomes. Instead, most studies have focused on polypharmacy, targeting the total number of drugs used or the “appropriateness” of drug use. Few studies of drug intervention have adequately addressed health outcomes, functional status, and resource utilization among geriatric patients. *Geriatric Drug Therapy Interventions* presents qualitative and quantitative evidence that pharmaceutical care can have a positive impact on health outcomes and cost of care.

The 3 research articles describe the impact of pharmaceutical care in different settings — ambulatory geriatric care, the acute care hospital, and the nursing home environment. Throughout these settings the researchers frequently encountered opportunities for pharmacy interventions. Recommendations were usually accepted by the prescriber, most were rated as having a significant impact on health outcomes, and most resulted in cost savings. Among the limitations of these studies was their descriptive nature (they had no control groups). Economic modelling suggested impressive

potential cost savings; however, sensitivity analysis would have added to the robustness of the results.

The final chapter is an illustrative case report, an example of the “high-touch, low-tech” approach that Cooper describes in his review article. Commonly used drugs frequently cause predictable adverse effects, not because of a lack of pharmacological knowledge, but because of a lack of communication between health care providers and an inadequate drug history — both basic components of pharmaceutical care. The body of work presented in this volume supports the need for and the effectiveness of pharmaceutical intervention, which should be a part of the standard of care for all patients, young and old.

This book would be of interest to pharmacists, as well as physicians caring for older patients. In addition, it will be a useful background resource for researchers interested in development and evaluation of health services.

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